

**DECLARATION AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted
with Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number 21251

First Named Inventor Balkrishen Bhat, et al.

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NUCLEOSIDE DERIVATIVES AS INHIBITORS OF RNA-DEPENDENT RNA VIRAL POLYMERASE

the specification of which

(Title of the Invention)

☒ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

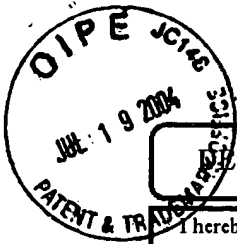
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f) or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/422,045	10/29/2002	21251PV



DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☐ Customer Number
OR
☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Philippe L. Durette	35,125	Melvin Winokur	32,763

Direct all correspondence to: ☒ Customer Number

Name	Philippe L. Durette				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-4568	Fax	(732)594-4720

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Balkrishen	Bhat

Inventor's Signature		Date	10/31/03
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Residence: City	Carlsbad	State	CA	Country	US	Citizenship	IN
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Post Office Address	Merck & Co., Inc., P.O. Box 2000				
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City	Rahway	State	NJ	ZIP	07065-0907
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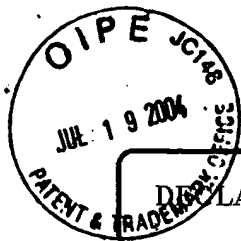
☒ Additional inventors are being named on the 4 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.



DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S)
Supplemental Sheet

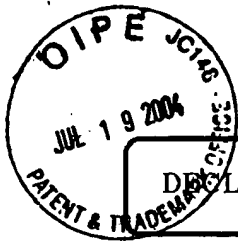
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Anne B.				Eldrup					
Inventor's Signature		<i>Anne Eldrup</i>			Date		<i>October 23/03</i>		
Residence: City		Encinitas		State CA		Country US		Citizenship DK	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature					Date				
Residence: City				State		Country		Citizenship	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature					Date				
Residence: City				State		Country		Citizenship	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature					Date				
Residence: City				State		Country		Citizenship	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	



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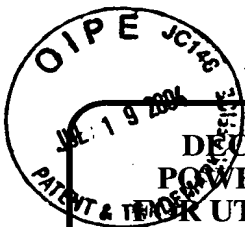
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Steven S.				Carroll					
Inventor's Signature						Date			
Residence: City		Yardley		State PA		Country US		Citizenship US	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
David B.				Olsen					
Inventor's Signature						Date			
Residence: City		Lansdale		State PA		Country US		Citizenship US	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Daniel R.				McMasters					
Inventor's Signature						Date			
Residence: City		Philadelphia		State PA		Country US		Citizenship US	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Malcolm				MacCoss					
Inventor's Signature						Date			
Residence: City		Freehold		State NJ		Country US		Citizenship GB	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	



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Supplemental Sheet

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Given Name (first and middle [if any])				Family Name or Surname											
Jie				Xia											
Inventor's Signature		<i>Jie Xia</i>				Date		10/24/03							
Residence: City		Carlsbad		State		CA		Country		US		Citizenship		CN	
Post Office Address		Merck & Co., Inc., P.O. Box 2000													
City		Rahway				State		NJ		ZIP		07065-0907			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor													
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Inventor's Signature								Date							
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Inventor's Signature								Date							
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Inventor's Signature								Date							
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☒ Declaration Submitted with Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	21251
First Named Inventor	Balkrishen Bhat, et al.
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

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				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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☐ Customer Number
OR
☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Philippe L. Durette	35,125	Melvin Winokur	32,763

Direct all correspondence to: ☒ Customer Number

Name	Philippe L. Durette				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-4568	Fax	(732)594-4720

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Balkrishen	Bhat

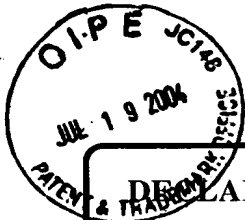
Inventor's Signature	Date
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Residence: City	Carlsbad	State	CA	Country	US	Citizenship	IN
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Post Office Address	Merck & Co., Inc., P.O. Box 2000				
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City	Rahway	State	NJ	ZIP	07065-0907
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☒ Additional inventors are being named on the 4 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.



DECLARATION AND POWER OF ATTORNEY

**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

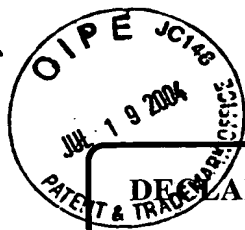
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Anne B.				Eldrup					
Inventor's Signature						Date			
Residence: City		Encinitas		State CA		Country US		Citizenship DK	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
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Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	



DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Steven S.				Carroll			
Inventor's Signature	<i>Steven S. Carroll</i>			Date	16 Oct, 2003		
Residence: City	Yardley	State	PA	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
David B.				Olsen			
Inventor's Signature	<i>David B. Olsen</i>			Date	16 Oct 03		
Residence: City	Lansdale	State	PA	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Daniel R.				McMasters			
Inventor's Signature	<i>Daniel R. McMasters</i>			Date	15 July 2004		
Residence: City	Philadelphia New York	State	PA NY	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Malcolm				MacCoss			
Inventor's Signature	<i>Malcolm MacCoss</i>			Date	16 July 2004		
Residence: City	Freehold	State	NJ	Country	US	Citizenship	GB
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		



DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Jie				Xia					
Inventor's Signature						Date			
Residence: City		Carlsbad		State CA		Country US		Citizenship US	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
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Inventor's Signature						Date			
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